

## Project Abstract Form

*Instructions:* This form is to be used to propose and describe an idea or activity that relates to the integration of services for children and youth with special health care needs and their families. This could include grant writing collaborations, trainings, strategies for streamlining services, etc. After you have completed the form please email to Jill Kipnes at kipnesj@azdhs or fax to (602) 542-2589. These abstracts will be posted on the grant website at [www.azis.gov](http://www.azis.gov).

Date:	Abstract Originator:	Originator's Agency, Organization or Company:	Originator's Contact Information (Phone and email):
Title:			
Project Description:			